Detailed Summary			Amendment Yes No
Use this form to summarize all disclosure reporting forms and 1. Committee Full Name (and Fund if applicable)	d to total monetary	y information.	
Committee to Elect 34, 1 M/ D	2. Type of Report Pre-Election	Who Vod Abil	3. ID Number
Start of Election Cycle: January 1,	2011	Total this	Total this
4) Cash on Hand at Start		Reporting Period	
RECEIPTS		\$ 3115.19	\$
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 3590.00	\$ 10,095.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 3390.00	·
8) Contributions from Other Political Committees	· · · · · · · · · · · · · · · · · · ·		\$
9) Loan Proceeds	(CRO-1230)	\$	\$
,	(CRO-1410)	\$	\$
10) Refunds/Reimbursements To the Committee11) Other Receipt Sources	(CRO-1240)	\$	\$
11a) Interest on Bank Accounts	(CD 0 1010)		
	(CRO-1250)	\$	\$
, and the second of the second	s (CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 1	Id and Ile)	\$ 3640.00	\$ 10,095.00
EXPENDITURES.			
13) Disbursements			200
13a) Operating Expenditures	(CRO-1310)	\$ 3278.84	\$ 4513.65
13b) Contributions to Candidates/Political Committee	es (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements From the Committee	·	\$	\$
17) In-Kind Contributions		\$ 870.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 1-	-		\$ 3025.00
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract			\$ 7538.65
ADDITIONAL INFORMATION	time 10)	\$ 2556.35	\$ 2556.35
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	8	
21) Outstanding Loans (incl. ones from other campaigns)	· · · ·		
187		<u> </u>	
,	(CRO-1610)	·	
23) Debts and Obligations owed To the Committee	(CRO-1620)		
24) Account Transfers Within the Committee	(CRO-1720) \$	<u> </u>	
25) Administrative Support	(CRO-1710) \$	<u> </u>	\$
26) Forgiven Loans	(CRO-1440) \$	S —— ———	\$
27) 48-Hour Notice Reports Sum	(CRO-2200) \$	}	\$
28) Contributions to be Refunded	(CRO-1215) \$	}	\$
070 4444			

MOORE COUNTY PUBLIC CURY

Amendment

Contributions from Individuals M Pg Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 2. ID Number 1. Committee Full Name (and Fund if applicable) Committee to Elect Mark Parson Add 3. Contributor Information Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Victor Uy Self Employed P.O. Box 4544 c. Employer's Name/Specific Field Neighborhood Cleaners Pinehurst, NC 28374 e. Election Sum to Date 100.00 k. Amount h. Form of Payment i. In-Kind Description j, Date (mm/dd/yyyy) f. Prior g. Account Code 100.00 10/03/2011 \$ 1 Check \$ \$ Add Remove 3. Contributor Information d. Comments b. Job Title/Profession a. Full Name, Mailing Address & Phone Self Employed (include city, state, & zip) D. Geoffrey John c. Employer's Name/Specific Field 10 Lawsons Pond Circle Golf Apparel Bluffton, SC 29910 e. Election Sum to Date 75.00 k. Amount j. Date (mm/dd/yyyy) f. Prior g. Account Code h, Form of Payment i. In-Kind Description \$ 75.00 10/14/2011 1 Check \$ \$ Add Remove 3. Contributor Information b. Job Title/Profession d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) Corporate Trainer Jan S. Mullis c. Employer's Name/Specific Field 1 Castlecombe Court Self Employed Pinehurst, NC 28374 e. Election Sum to Date 50.00 \$ j, Date (mm/dd/yyyy) k. Amount f. Prior i. In-Kind Description g. Account Code h. Form of Payment \$ 50.00 10/11/2011 1 Check \$ \$ 225.00 \$ 4. Total only this Page 5. Total of ALL CRO-1210 Pages 3590.00 \$

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Contr	ibutions fro	m Individuals		P	g <u>2</u> of	9_	Yes	No No
Use this	form to report ind	ividual contributions	over \$50	0 or contributions un	der \$50 if form CF			
1. Comn	nittee Full Name	(and Fund if applica	ble)			2. ID Nun	nber	
Committ	ee to Elect Mark I	Parson						
3. Contr	ibutor Informati	on		Add Re	emove			
	me, Mailing Address	& Phone		b. Job Title/Professio	n	d. Commen	ts	
	city, state, & zip)			Cohool Tooobor				
Ruth K.	Waiker Wood Drive			School Teacher c. Employer's Name/S	Specific Field	-		
	t, NC 28374			Retired	specific ricid			
1 monurs	1,110 20574			Rothed		e, Election S	ium to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-H	Lind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	1	Check			10/11/2	2011	\$	100.00
							\$	
]					\$	
3. Contri	ibutor Informatio	on		Add 🗌 Re	emove		·	
a. Full Nan	ne, Mailing Address	& Phone		b. Job Title/Profession	0	d. Comment	S	
	city, state, & zip)							
Elinor W				Travel Agent		-		
2 Knollw				c. Employer's Name/S Retired	-{			
rmenursi	, NC 28374			Retiled		e. Election S	um to Date	
						\$	100.00	
f. Prior		h. Form of Payment	: T- 1/	ind Description	j. Date (mm/dd/yy	<u> </u>	k. Amount	
r Eug.	g. Account Code		1, 111-14	and Description	10/1412		\$	100.00
	1	Check	1		10/1412			
			<u> </u>				\$	
			<u> </u>				\$	
	butor Informatio		_Ц_		emove	T		<u></u>
	ne, Mailing Address &	& Phone		b. Job Title/Profession	<u> </u>	d. Comment	<u>s</u>	
	eity, state, & zip)			Physician				
Robin Cu	mmings Fimbers Drive			Physician c. Employer's Name/S	4			
	, NC 28374			Community Care		1		
	, - · · ·					e. Election S	um to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	Check		<u>.</u>	10/18/2	011	\$	100.00
					ļ. <u></u>		\$	
							\$	
4. Total	only this Page	e				\$		300.00
5. Total	of ALL CRO	-1210 Pages				\$		3590.00
(This line	must be an line 6 of I	Datailed Summary Page Cl	RA-1100)					

Amendment

Amendment

Cont	ributions fr	om Individuals		T.	Pg <u>3</u> 0	ıf 9	Amendme Y	
Use this	s form to report in	dividual contributions	over \$5	50 or contributions ur	nder \$50 if form C	RO 1205 is		
1. Com	mittee Full Name	e (and Fund if applic	able)			2. ID N	·	
Commi	ttee to Elect Mark	Parson						
3. Cont	ributor Informat	tion		Add R	emove	1 947		
a. Full Na	ame, Mailing Address	s & Phone		b. Job Title/Professio	Transaction is	d. Comme	ents	<u></u>
	e city, state, & zip)							
Justin B		,		Chiropractor		_		
	organton Road, J- st, NC 28374	0		c. Employer's Name/S	Specific Field	_		
1 1101141	bi, 110 20574			Sen Employed		e Flection	Sum to Date	
						\$	100.00	
f. Prior	g. Account Code	b. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	:
	1	Check	<u> </u>		10/18/2	2011	\$	100.00
							\$	
							\$	
3. Contr	ibutor Informati	ion		Add 🗌 Re	move			.]
	me, Mailing Address	& Phone		b. Job Title/Profession	1	d. Commer		
	city, state, & zip)			ļ				
Alice Be	erry organton Road, X-	22		Housewife		_		
	nganion Road, A- t, NC 28374	-23		c. Employer's Name/S	pecific Field	-		
1 1110114115	,110 20374					e. Election	Sum to Date	
		<u>-</u>	·			\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/y)	уу)	k. Amount	
	1	Check	<u> </u>	<u> </u>	10/18/2	011	\$	50.00
							\$	
							\$	
3. Contr	ibutor Informati	on		Add Re	move	٧		-
	ne, Mailing Address	& Phone		b. Job Title/Profession		d. Commen	ts	·· ··
	city, state, & zip)							
	Tremblay chael Drive			Housewife	201 - 372 - 3-3			
	, NC 28374			c. Employer's Name/Sp	Decilic Field			
2 210114151	, 110 2007					e. Election S	Sum to Date	
						\$	50.00	· · ·
f. Prior	g. Account Code	b. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	Check			10/18/20	011	\$	50.00
							\$	
							\$	
4. Total	only this Pag	e	<u> </u>		-1	\$	<u> </u>	200.00
	of ALL CRO				· · · · · · · · · · · · · · · · · · ·	.	· -··· · · · · · · · · · · · · · · · ·	2500.00
		Detailed Summary Page Cl	RO-1100)			\$		3590.00

CRO-1210

		m Individuals	over \$5	Pi O or contributions un			Amendmen X Yes of used	No
	<u></u>	(and Fund if applica				2. ID Nun		
Committ	ee to Elect Mark I	Parson	•		-			
3. Contr	ibutor Informati	on .		Add Re	emove			
a. Full Na	ne, Mailing Address	& Phone		b. Job Title/Profession	1	d. Comment	ls	
	city, state, & zip)			1		1		
Ralph No				CEO/ Executive	10 72 1.1	-		
P. O. Box	k 5329 i, NC 28374			c. Employer's Name/S	specific rieiu	-		
i monuis	, 140 20574			Rothed		e. Election S	um to Date	
						\$	100.00	
	T : = 2:	1.5	T		1.5.4.43	.l	k. Amount	<u></u>
f. Prior	g. Account Code	h. Form of Payment	i. In-J	Kind Description	j. Date (mm/dd/yy			100.00
	1	Check	 		10/21/2		\$	100.00
						·	\$	
							\$	
-	butor Informatio	·		Add 🗌 Re	move	 		
•	ne, Mailing Address	& Phone		b. Job Title/Profession	1	d. Comment	<u> </u>	
John Sky	city, state, & zip)	· 	-	CEO				
615 Lind				c. Employer's Name/S	1			
Pinehurst, NC 28374			Restoration Systems, LLC					
						e. Election S	um to Date	
						\$	200.00	<u> </u>
f. Prior	g. Account Code	h. Form of Payment	i. In-H	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	Check			10/21/2	011	\$	200.00
			ļ.	··			\$	
							\$	<u> </u>
	butor Informatio				move			
	ie, Mailing Address &	& Phone		b. Job Title/Profession	•	d. Comments	<u> </u>	
Janet Mer	ity, state, & zip) ritt			Housewife				
	r Pine Drive			c. Employer's Name/S	pecific Field]		
Pinehurst	, NC 28374					e. Election Si	um to Date	- ··-··
						\$	15.00	
f. Prior	g. Account Code	b. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	Check			10/24/20	011	\$	15.00
							\$	
							\$	
4. Total	only this Page	e				\$		315.00
	of ALL CRO	·			·	\$		3590.00
		Detailed Summary Page Cl	RO-1100)	1		.		3390.00

MODIE COUNTY PUBLIC COPY

Yes

Contributions from Individuals

Use this f	orm to report indi	vidual contributions o	ver \$50	or contrib	outions unde	er \$50 if form CR				
1. Committee Full Name (and Fund if applicable)								2. ID Number		
Committe	ee to Elect Mark P	arson								
3. Contri	butor Informatio	n		Add	Rem	nove	<u>,</u> ,			
a. Full Nam	e, Mailing Address &	Phone		b. Job Tit	le/Profession		d. Comments			
	ity, state, & zip)									
Bob Klug				Real Est						
P. O. Box				c. Employ Self Em	er's Name/Spe	ecitic Field				
Pinenurst	, NC 28370			Sen Em	ipioyeu		e. Election Su	m to Date		
							\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descrip	tion	j. Date (mm/dd/yy	yy)	k. Amount		
	1	Check				10/21/20	011	\$	100.00	
								\$		
								\$		
3. Contri	butor Informatio	n		Add	Rem	iove				
	e, Mailing Address &			b. Job Titl	le/Profession		d. Comments			
	ity, state, & zip)				<u></u>					
Mark Elli	ott				ant Owner/C		}			
	wood Drive			c. Employer's Name/Specific Field						
Pinehurst	, NC 28374			Self Employed			e. Election Sum to Date			
	•						\$	100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Descrip	tion	j. Date (mm/dd/yy	уу)	k. Amount		
	1	Check				10/21/20	011	\$	100.00	
								\$		
								\$		
3. Contri	butor Informatio	B		Add	Rem	ove	·			
a. Full Nam	ie, Mailing Address &	Phone		b. Job Titl	le/Profession		d. Comments			
	ity, state, & zip)									
Michael I				Retail	1. N (6)	-101-301-1-3				
•	nple Road			c. Employer's Name/Specific Field Self Employed						
Pinehurst	, NC 28374			Sell Elli	proyeu		e. Election Su	m to Date		
							\$	300.00		
f. Prior	g. Account Code	h. Form of Payment	i, In-K	ind Descrip	tion	j. Date (mm/dd/yy	yy)	k. Amount		
	1	Check				10/21/20	011	\$	300.00	
	···							\$		
								\$		
4. Total	only this Pag	2					. \$		500.00	
	of ALL CRO	-					\$	•	3590.00	
(This line	must be on line 6 of I	Detailed Summary Page Cl	<i>(0-1100)</i>							

		m Individuals lividual contributions	over \$5	I O or contributions w	Pg <u>6</u> (f <u>9</u>	Amendme Ye	
1. Com	mittee Full Name	(and Fund if applic	able)	o or contributions th	nder 450 it form C	2. ID No		
	tee to Elect Mark					27.13		
3. Cont	ributor Informati	ion		Add R	emove			
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Profession		d. Comme	nts	
	city, state, & zip)					1		
	abenstein			Retired - Sales				
14 Hawi				c. Employer's Name/	Specific Field			
Pinenurs	et, NC 28374			3M Corp.				
ľ						e. Election	Sum to Date	
						\$	85.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/)	ууу)	k. Amount	
			Rec	eption	10/17/	2011	\$	85.00
							\$	
							\$	
	ibutor Informati			Add Re	emove			
	ne, Mailing Address	& Phone		b. Job Title/Profession	n	d. Commer	ıts	
	city, state, & zip)							
Terry La	moert haven Drive			Retired		4		
	, NC 28374			c. Employer's Name/S	specific Field	-		
1 110114151	., 110 20574			Alco		e. Election :	Sum to Date	
				į				
<u> </u>						\$	33.00	
f. Prior	g. Account Code	b. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/y	уу)	k. Amount	
			Rece	ption	10/11/2	011	\$	33.00
			-				\$	
			<u> </u>	***			\$	
	butor Informatio		Ш_		move		<u> </u>	
	ie, Mailing Address & ity, state, & zip)	& Phone		b. Job Title/Profession	l	d. Commen	ts	
Charles C				Airline Pilot				
	Shore Boulevard			c. Employer's Name/S	necific Field	-		
	NC 28374			Retired				
						e. Election S	um to Date	
						\$	120.00	
f. Prior	g. Account Code	b. Form of Payment	i. In-Ki	nd Description	j. Date (mm/dd/yy	уу)	k. Amount	
			Rece	ption	10/05/20)11	\$	20.00
					,		\$	
							\$	
4. Total	only this Page					\$		138.00
5. Total	of ALL CRO-	-1210 Pages				\$		3590.00
(This line	must be on line 6 of D	etailed Summary Page CR	O-1100)			Ψ		3370.00

CRO-1210

MOORE COUNTY PUBLIC COPY

Contributions from Individuals

Use this	s form to report in	dividual contributions	over \$5	r or contributions ur	nder \$50 if form C	RO 1205 is	not used	's [] 'N'
1. Com	mittee Full Name	(and Fund if applic	able)			2. ID Ni	_	
Commi	ttee to Elect Mark	Parson		<u>-</u>	, _			•
	ributor Informat			Add R	emove		en ejej, t	<u>.</u> .
	ame, Mailing Address	& Phone	·	b. Job Title/Professio		d. Comme		
	e city, state, & zip)	-						
Leslie E 3 Maple	~			Marketing Consu		_		
	st, NC 28374			c. Employer's Name/S Self Employed	Specific Field	4		
	,			Son Employed		e Election	Sum to Date	
C D .:	T				·	\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
			Rec	eption	10/21/2	2011	\$	50.00
			_				\$	
							\$	
	ibutor Informati			Add 🗌 Re	move		· · · · · · · · · · · · · · · · · · ·	
	me, Mailing Address	& Phone		b. Job Title/Profession		d. Commen	its	
	city, state, & zip)				<u>.</u>			
P. O. Box	Anderson			Print Media		4		
	t, NC 28370			c. Employer's Name/Sp Retired	pecific Field			
	,, 110 20370			Retifed		e. Election 5	Sum to Date	
						\$	100.00	
f. Prior	g. Account Code	b. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/y)	yy)	k. Amount	
	1	Check			10/23/2	011	\$	100.00
							\$	
							\$	·
3. Contri	ibutor Informatio	on		Add Rer	nove			[
a. Full Nan	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Commen	ts	
	city, state, & zip)							
Carrie Ha 10 Midla:				Housewife				
	, NC 28374			c. Employer's Name/Sp	ecitic Field			·
	,110 20571					e. Election S	um to Date	
			1			\$	1000.00	
Prior	g. Account Code	h. Form of Payment	i. In-Ki	nd Description	j. Date (mm/dd/yy	/v)	k. Amount	
	1	Check		· · · · · · · · · · · · · · · · · · ·	10/21/20		\$	1000.00
						·	\$	
							\$	
l. Total	only this Page		_			\$	-	1150.00
. Total	of ALL CRO-	-1210 Pages						
	or right cito					\$		3590.00

MODEL COUNTY PUBLIC COPY

Contributions from Individuals Pg of Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number Committee to Elect Mark Parson 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Steve Saye Real Estate/Golf Packaging 40 McCaskill Road c. Employer's Name/Specific Field Pinehurst, NC 28374 Self Employed e. Election Sum to Date \$ 250.00 f. Prior h. Form of Payment g. Account Code i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Reception 10/01/2011 250.00 \$ \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Frank Thigpen Attorney P.O. Box 1985 c. Employer's Name/Specific Field Pinehurst, NC 28370 Self Employed e. Election Sum to Date \$ 250.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Reception 10/01/2011 \$ 250.00 \$ \$ 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) **Ted Thomas** Finance 390 Pine Vista Drive c. Employer's Name/Specific Field Pinehurst, NC 28374 Retired e. Election Sum to Date \$ 62.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Reception 10/09/2011 \$ 62.00 \$ \$ 4. Total only this Page \$ 562.00 5. Total of ALL CRO-1210 Pages \$ 3590.00 (This line must be on line 6 of Detailed Summary Page CRO-1100)

MARK CONTRACT PROBLE CONV

Conti	ributions fro	m Individuals		P	g 9 of	r 9	Amendine Ye	
Use this	form to report inc	dividual contributions	over \$5					
1. Com	mittee Full Name	(and Fund if applic	able)			2. ID Nu	mber	
Commit	tee to Elect Mark	Parson						
3. Conti	ributor Informat	ion		Add 🔲 Re	emove	· · · · · · ·		
a. Full Na	me, Mailing Address	& Phone		b. Job Title/Profession	0	d. Commer	nts	
	city, state, & zip)							
Richard				Engineering		4		
	hstone Road			c. Employer's Name/S	Specific Field	4		
Fillelluis	t, NC 28374			Retired		a Floation	Sum to Date	
								<u>.</u>
						\$	340.00	
f. Prior	g. Account Code	b. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
			Rec	eption	10/20/2	2011	\$	90.00
							\$	
							\$	
3. Contr	ibutor Informati	on		Add Re	move			
a. Full Nai	ne, Mailing Address	& Phone		b. Job Title/Profession		d. Commen	ts	
	city, state, & zip)			Retired				
	. Singleton					_		
	andrews Drive	•		c. Employer's Name/S		4		
rmenurs	t, NC 28374			General Electric C	deneral Electric Capital			
						e. Election S	 ,- -	
						\$	30.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	Check			10/06/2	011	\$	30.00
							\$	
							\$	
3. Contri	butor Informatio	on		Add Rei	move			
a. Full Nan	ne, Mailing Address	& Phone		b. Job Title/Profession		d. Comment	is	·
	eity, state, & zip)							
Phil Hine	-			Realtor	- <u> </u>			
P. O. Box				c. Employer's Name/Sp				
rmenursi	, NC 28374			Chanticleer Proper	ues	e. Election S	um to Date	
e n :		T	1.2.2			\$	80.00	
f. Prior	g. Account Code	b. Form of Payment	1	ind Description	j. Date (mm/dd/yy		k. Amount	
			REce	eption	09/26/20	O11	\$	80.00
			ļ .				\$	
							\$	
4. Total	only this Pag	e				\$		200.00
5. Total	of ALL CRO	-1210 Pages				\$		3590.00
(This line	must be on line 6 of I	Detailed Summary Page Cl	RO-1100)			Ф		3370.00

CRO-1210